Health and Wellness

BUSINESS PLAN 2004-07

ACCOUNTABILITY STATEMENT

The Business Plan for the three years commencing April 1, 2004 was prepared under my direction in accordance with the *Government Accountability Act* and the government's accounting policies. All of the government's policy decisions as of February 27, 2004 with material economic or fiscal implications of which I am aware have been considered in preparing the Business Plan.

The Ministry's priorities outlined in the Business Plan were developed in the context of the government's business and fiscal plans. I am committed to achieving the planned results laid out in this Business Plan.

Gary Mar, *Minister of Health and Wellness*
March 4, 2004

THE MINISTRY

The Ministry is comprised of the Department of Health and Wellness and the Alberta Alcohol and Drug Abuse Commission (AADAC). This Business Plan sets out strategic changes, improvements and activities for both components of the Ministry in the three years ahead. The Ministry Business Plan guides the department operational plans. Supplementary information on AADAC's business plan is in the appendix. This Business Plan is also a framework for development of multi-year performance agreements and plans by health authorities.

Financial information is consolidated in the attached Ministry Statement of Operations. A summary of progress on this Business Plan will be reported in the 2004-05 Annual Report for Alberta Health and Wellness. A more detailed description of how the health system in Alberta works today can be found on our Web site at

www.health.gov.ab.ca/public/document/health_system_works.htm.

LINK TO GOVERNMENT STRATEGIC BUSINESS PLAN

PROVINCIAL OPPORTUNITIES FOR THE NEXT TWENTY YEARS

1. Unleashing Innovation
2. Leading in Learning
3. Competing in a Global Marketplace
4. Making Alberta the Best Place to Live, Work and Visit

GOVERNMENT OF ALBERTA CORE BUSINESSES

People...

improving the quality of life in Alberta for individuals and their families through the government's priorities for health, education, our children, those in need and Aboriginal Albertans.

Prosperity...

protecting the quality of life in Alberta through the government's priorities for our economy, resources, local government sector, and the province's financial and intergovernmental position.

Preservation...

reflect the government's priorities for community safety, the environment, and our natural, historical and cultural resources.

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Government Goals Relating to Health

Albertans will be healthy.
Albertans will be well prepared for lifelong learning and work.
Alberta's children and youth will be supported in reaching their potential.
Albertans will be self-reliant and those unable to provide for their basic needs will receive help.
Aboriginal communities and people in Alberta will have improved social and economic circumstances.
Alberta will have an effective, responsive and well-managed local government sector.
Alberta will have a prosperous economy.
Alberta will have a financially stable, open and accountable government and a strong intergovernmental position in Canada.
Alberta will be a fair and safe place to work, live and raise families.
The high quality of Alberta's environment will be sustained.
Alberta will have effective and sustainable government-owned and supported infrastructure.

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Core Businesses for Ministry of Health and Wellness

Encourage and support healthy living.
Ensure quality health services.
Lead the health system.

Goals for Health and Wellness

Albertans choose healthier lifestyles.
Albertans' health is protected.
Improved access to health services.
Improved health service outcomes.
Health system sustainability.
Ministry organizational excellence.

VISION

Healthy and well Albertans

MISSION

Provide leadership and work collaboratively with partners to assure the delivery of quality affordable health services and wellness programs to help Albertans be healthy.

CORE BUSINESSES

Core Business 1: Encourage and support healthy living.
- Goal 1 - Albertans choose healthier lifestyles.
- Goal 2 - Albertans' health is protected.

Core Business 2: Ensure quality health services.
- Goal 3 - Improved access to health services.
- Goal 4 - Improved health service outcomes.

Core Business 3: Lead the health system.
- Goal 5 - Health system sustainability.
- Goal 6 - Ministry organizational excellence.

SIGNIFICANT OPPORTUNITIES AND CHALLENGES

This is an exciting time for Alberta's health system. Recent reforms in key areas laid the foundation for improved accessibility, integration and cost-effectiveness. The Premier's Advisory Council on Health proposed significant change in its report released January 2002. That report is the blueprint to strengthen and sustain Alberta's health system. Partnerships with health authorities, service providers and other stakeholders have given rise to innovative ways to increase effectiveness. At the same time, our partnerships continue to improve the accessibility and quality of health services. The 2004-07 Government of Alberta Strategic Business Plan acknowledges Albertans want and expect to be full participants in governing the province and the services it provides. Community governance is considered a normal operating procedure.

Beginning in the fiscal year 2003-04, the Ministry made important changes to the strategic alignment, accountability and performance of the nine regional health authorities and two provincial boards. Multi-year performance agreements that include plans, expectations and performance measures will set out in clear terms the duties and obligations of the Minister and the health authorities. The performance agreements will focus on recommendations of key direction-setting documents such as the following:

- *A Framework for Reform,*
- *Healthy Aging: New Directions for Care,*
- *Going Further: Building on a Framework for Reform.*

The Ministry strives to provide a quality health system that is contemporary, responsive, affordable and well-managed. Initiatives proposed by the Premier's Advisory Council on Health have been integrated with most aspects of the Ministry's business, resulting in significant improvement to the foundation of Alberta's health system.

CHANGING POPULATION PROFILE

Alberta's population is growing and aging. By 2016, 10 to 14 per cent of Albertans will have reached age 65 or older. Alberta will need to offer more customized models of care, which will allow people to 'age-in-place'. A significant proportion of Albertans are Aboriginal with specific health needs. The challenge is to enhance the opportunities for all Albertans to optimize their personal health and wellness.

HEALTHY CHOICES AND OPPORTUNITIES

The health of individuals is influenced by the choices they make. The Government of Alberta Strategic Business Plan requires collaboration to positively influence the factors that lead to healthy human development.

TECHNOLOGICAL ADVANCES

Maintaining Alberta's leadership in health technology and innovation will benefit our future economy. Technological innovation creates opportunities to improve service delivery. The challenge will be to evaluate the cost and benefit of new technologies, including health outcomes.

HEALTH HUMAN RESOURCES

We need to pursue opportunities for collaboration with educational institutions to meet the health human resource need. Population changes will increase demand for all types of health services. New concepts in health human resource planning are being implemented to enhance health service delivery. The challenge is to ensure an appropriately skilled workforce will be available for the future.

PUBLIC HEALTH RISK MANAGEMENT

Alliances across governments will ensure Albertans benefit from best practices at the national and international level. Recent events such as Severe Acute Respiratory Syndrome (SARS) and West Nile virus have focused public awareness on our health system's preparedness and communications capacity for population health emergencies. The Ministry will continue to refine existing readiness plans.

SUSTAINABILITY

The Ministry will play a leadership role at provincial and national levels to maintain the necessary flexibility for creative and innovative local solutions. Health sustainability means investing in the health and wellness of the population over time using the human and financial resources available. The challenges bring opportunities to be innovative and flexible.

STRATEGIC PRIORITIES 2004-07

The Ministry strategic priorities for the next three years have been identified. These priorities are in addition to the important ongoing core activities of the Ministry.

1. Strengthen public health risk management capabilities.

Linkage: Goal 2

Albertans want to know that their health system is prepared and able to protect them from risks to their health. Recent events such as the outbreak of SARS and West Nile virus have reinforced the importance of strong public health programs. Albertans are partners in this effort. Key strategies for managing public health risks include:

Protect Albertans against communicable diseases

Strengthen and restructure system capacity to respond to public health issues and risks.

Protect Albertans from environmental health risks

Protect Albertans from health risks in the environment through education, regulatory enforcement and partnership with other agencies.

105-02009/

2. Enhanced health system sustainability.

Linkage:
Goals 1, 3, 4, 5 and 6

The long-term sustainability of Alberta's health system depends on it being contemporary, responsive, affordable and well-managed. Contemporary means adopting best practices based on evidence, using current and new technology and further developing an adaptable and progressive health workforce. Responsiveness means providing a wide range of choices to meet Albertans' changing and diverse health needs. Affordability means achieving the highest level of quality with available resources and balancing needs with other demands for services such as education. Well-managed means creating and maintaining partnerships, effective governance and management structures. Key strategies in support of sustainability include:

Cross-Ministry Health Sustainability Initiative
Enhance the sustainability of the health system now and in the future by strengthening policy integration and collaboration across Ministries.

Primary health care
Access to health services is an important issue for Albertans. Implementation of the agreement with the Alberta Medical Association and health authorities will enhance access to primary health care throughout Alberta. Albertans expect that services will be available when needed and provided in an effective and coordinated manner.

Community care
In many instances, community-based care has proven to be an effective alternative to high cost acute care provided in traditional hospital settings. By strengthening the capacity of community-based health service providers, Alberta seniors, persons with disabilities and those with mental health needs will be able to receive the care they need on a timely basis in their communities.

Alternate funding mechanisms
The future sustainability of Alberta's health system will depend on finding new ways of resourcing the growing list of health services and programs which people find to be of benefit and value in maintaining optimum health and wellness. Many of these extend beyond established *Canada Health Act* services.

Electronic health record
The continuous improvement of quality is an integral part of health service delivery in Alberta. The expansion of the electronic health record will improve quality by ensuring that health service providers have pertinent and accurate health information. This will result in more accurate diagnosis and treatment for better, safer patient care.

Health promotion and protection
Albertans want to take greater personal responsibility for their own health and wellness. Proper exercise and nutrition, combined with decisions that reduce personal health risks, will improve quality of life and long-term health outcomes and decrease demands on the health system.

Health workforce recruitment and retention
A quality health system requires a competent, progressive health workforce. Close co-operation among employers, health services providers and the education system is required to develop, attract and retain health professionals.

CORE BUSINESSES, GOALS, STRATEGIES AND MEASURES

Core Business One: Encourage and support healthy living.

GOAL ONE 1

Albertans choose healthier lifestyles.

What it means Health and wellness are influenced by genetic factors, early childhood development, education, employment status and the environment. Albertans want to stay healthy and are willing to learn about healthy choices to improve their quality of life. Government can help by providing timely and accurate health information in a supportive environment.

Strategies

1.1 Provide health and lifestyle information to help people make healthy choices as encouraged by the *Healthy U Campaign* and the Framework for a Healthy Alberta.

1.2 Enable people to make appropriate use of the health system through counselling and information services like HealthLink.

1.3 Collaborate with other Ministries on initiatives to address the needs of children, youth, seniors, aboriginal communities and Albertans with disabilities or who are disadvantaged.

1.4 Ensure that addiction information, prevention and treatment is available province-wide.

Performance Measures	Last Actual (year)	Target (2004-07)
1.A Self-reported health status " excellent, very good or good health"		
Age 18-64	90% (2003)	90% (2005)
Age 65+	80% (2003)	80% (2005)
1.B Per cent of Albertans who smoke	28% (2000-01)	25% (2004-05)
1.C Per cent of Alberta youth (age 12-19) who smoke*	17.9% (2000-01)	15% (2006-07)
1.D Per cent of Albertans who are "active or moderately active"	52% (2000-01)	55% (2004-05)
1.E Per cent of Albertans with "acceptable" body mass index (BMI)	47% (2000-01)	50% (2004-05)
1.F Per cent of Alberta women who consumed alcohol during pregnancy	3.9% (2000-01)	2.5% (2004-05)**

* Also one of AADAC's performance measures.

** Target is 0 per cent by 2012.

GOAL TWO 2

Albertans' health is protected.

What it means As public health issues like SARS gain attention worldwide, Albertans need to know their health system is ready and able to protect their health. Alberta Health and Wellness, in collaboration with health authorities and other partners, will continue to protect Albertans from disease and injury.

Strategies

2.1 Protect Albertans against communicable diseases by strengthening the health system's capacity to respond to public health issues and risks, including immunization and implementation of Alberta's pandemic influenza response plan as necessary.

2.2 Protect Albertans from environmental health risks through education, environmental monitoring, regulatory compliance and enforcement in partnership with other Ministries.

2.3 Collaborate with other Ministries to ensure safe and secure drinking water for Albertans.

2.4 Reduce suicide and the risk of serious injury through education and targeted interventions in collaboration with other agencies.

2.5 Develop networks and initiatives that improve access to disease screening and prevention services (e.g., diabetes).

Performance Measures	Last Actual (year)	Target (2004-05)
2.A Childhood immunization coverage rates:		
Diphtheria, tetanus, pertussis, polio, Hib	78% (2001)	88% (2005)
Measles, mumps, rubella	87% (2001)	98% (2005)
Pneumococcal and meningococcal	New	97% (2005)
2.B Per cent of seniors who have received the recommended annual influenza (flu) vaccine	66% (2002-03)	75% (2004-05)
2.C Mortality rates for injury and suicide (per 100,000)	50 (2001)	45 (2004)
2.D Screening rate for breast cancer per cent of women age 50 - 69 receiving screening mammogram every two years	71% (2000-01)	75% (2004-05)

Core Business Two: Ensure quality health services.

GOAL THREE 3

Improved access to health services.

What it means

Albertans expect health services will be accessible where and when needed. Working with health authorities and service providers, Alberta Health and Wellness sets access standards for the health system. Improved access includes standards for wait times, geographic access and supports for choice in health services. These standards and their targets are as interconnected as the health system itself, and any target affects other health services.

Strategies

3.1 Develop and implement access standards for selected services and the electronic booking system for the province.

3.2 Expand participation in Alberta's Electronic Health Records.

3.3 Work tri-laterally with the Alberta Medical Association and health regions to implement changes to improve primary health care:

- 24 hours a day, seven days a week access to primary care services;
- greater use of multi-disciplinary teams;
- improved coordination and integration with other health care services;
- increased emphasis on health promotion, disease and injury prevention, including chronic disease management (e.g., diabetes).

3.4 Ensure appropriate access to health services in rural and remote areas.

3.5 Develop and implement guidelines for emergency health, trauma services and obstetrical services.

3.6 Promote options for continuing care that allow Albertans to 'age-in-place.'

3.7 Complete Broda report implementation through strategies focused on:

- quality of long-term care services;
- coordinated access to long-term care services; and
- consolidation and modernization of legislation relevant to long-term care.

3.8 Protect Albertans from catastrophic drug costs.

Performance Measures	Last Actual (2003)	Target (2005)
3.A Regional Health Authority achievement of targets based on clinical urgency		
Hip replacement	New	To be determined*
Heart surgery	New	To be determined*
Cancer radiation (breast & prostate)	New	To be determined*
MRI	New	To be determined*
3.B Number waiting for long-term care facility placement:		
In acute hospital	340	340 - No improvement
Urgent in community	457	457 - No improvement
3.C Ratings of ease of access to health services		
Physician services	86%	86% - Maintain
Hospital services	72%	72% - Maintain

* Measures and targets will use Wait List Registry data. Targets under development will take into consideration clinical factors, available resources and impacts on other areas within the health system.

GOAL FOUR 4

Improved health service outcomes.

What it means Albertans expect the best possible care and outcomes every time they use the health system. As part of its leadership and assurance role, the Ministry establishes quality standards for safety, accessibility and effective use of resources. This role also includes ensuring compliance. The Ministry continually updates standards and develops new initiatives in response to technological advances, demographic changes and other factors.

Strategies

4.1 Promote quality standards for health services, such as patient safety.

4.2 Use information from the Health Quality Council of Alberta to improve performance of Alberta's health system.

4.3 Help Albertans with chronic health conditions maintain optimum health through appropriately managed and coordinated care.

4.4 Ensure Albertans receive health services from the most appropriate facilities or providers.

4.5 Refine mechanisms to deal with health care concerns and complaints.

Performance Measures	Last Actual (year)	Target (2002-07)
4.A Ratings of quality of care received:		
Overall	85% (2003)	85% - Maintain (2004)
Hospital	83% (2003)	83% - Maintain (2004)
4.B Per cent of persons who have received a service who are satisfied with the way the service was provided	87% (2003)	90% (2005)
4.C Success in treating people with chronic conditions in their communities - Ambulatory Care Sensitive Conditions hospitalization rates* (per 100,000, age standardized)	460 (2000-01)	460 - No improvement (2004-05)
4.D Heart attack survival rate (30 day survival in hospital) (three year average for data)	90% (1998-2001)	92% (2002-05)
4.E Satisfaction with response to complaint about health services	33% (2002)	50% (2007)

* Reduced hospitalization rates for chronic conditions like asthma, diabetes, depression, hypertension, neurosis, and alcohol and drug dependencies.

Core Business Three: Lead the health system.

GOAL FIVE 5

Health system sustainability.

What it means

Alberta's complex health system is challenged by continuous change, rising costs, steady growth and increased public expectations. A sustainable health system must meet these challenges today and in the future while remaining affordable to the taxpayer. Maintaining quality and public confidence while slowing the growth of provincial health care expenses in relation to provincial revenues are key requirements for a sustainable health system. Attaining health system sustainability requires the collaboration of stakeholders and especially the Alberta public who use the system. Public communication and education strategies under Goal 1 will help Albertans become more effective partners in managing public health care. Collaboration with Alberta Infrastructure is needed to ensure Alberta's infrastructure supports health and wellness service delivery.

Strategies

System Management

5.1 Lead the Health Sustainability Initiative, which strengthens collaboration, integration and coordination across government ministries to enhance the sustainability of the public health system.

5.2 Provide leadership in federal-provincial relations to maintain Alberta's ability to meet local health needs.

5.3 Collaborate with health authorities and other partners on integrated policy and planning initiatives.

5.4 Implement multi-year performance agreements with health authorities that promote innovation, collaboration and set out performance expectations and deliverables.

5.5 Collaborate to evaluate alternative ways to finance programs not covered by the *Canada Health Act*, including cost-sharing approaches for a wide range of services.

Health Workforce

5.6 Work with key stakeholders on plans and initiatives, such as the Rural Physician Action Plan, to educate, recruit and retain the needed health workforce.

5.7 Increase flexibility of the health workforce within the provisions of the *Health Professions Act*.

Technology

5.8 Improve processes to evaluate effectiveness and cost and coordinate implementation of new health care technologies, including drugs.

5.9 Implement integrated information systems, including the Electronic Health Record, that will support research and improve clinical and management decision-making.

5.10 Lead implementation of health information management best practices, including privacy and security.

5.11 Implement Information Management/Information Technology Governance Council processes and structures to guide health sector investments in strategic information management and information technology.

Performance Measures	Last Actual (year)	Target (2004-07)
5.A Public rating of health system overall	65% (2003)	65% - Maintain (2004)
5.B Physical Condition of Health Facilities - Per cent of publicly owned health care facilities in fair or good physical condition.	93% (2002-03)	94% (2004-05)
5.C Per cent increase in provincial health expenses in relation to the per cent growth in provincial revenues*		1.5 (2005-06)
5.D Funding for services provided		
Portion of provincial contribution	81% (2003-04)	75% (long-term)
Portion of federal contribution	19% (2003-04)	25% (long-term)
5.E Developing and maintaining workforce capacity	New	To be determined

* Target is 1.0 by 2012.

GOAL SIX 6 Ministry organizational excellence.

What it means Albertans want to know the Ministry is working efficiently and it will continue to provide excellent service. To do this, the Ministry must work in partnership to use available human, financial and technological resources in the best possible way and foster the culture of a learning organization.

Strategies

6.1 Improve the department's leadership and the quality of its contribution to Cross-Ministry Initiatives.

6.2 Deliver high quality information and client service through Ministry direct operated programs.

6.3 Cultivate a supportive work environment that encourages teamwork and shared responsibility.

6.4 Foster an organizational culture of learning and continuous improvement.

6.5 Maximize effectiveness of stakeholder networks and relationships.

6.6 Enhance Ministry performance through appropriate systems and tools.

Performance Measures	Last Actual (year)	Target (2004-05)
6.A Per cent of stakeholders reporting easy access to information	New	Improvement Target to be determined
6.B Per cent of Albertans reporting their inquiries to the department were handled satisfactorily	82% (2002)	85% (2004)
6.C Number of contacts regarding the Alberta Health Care Insurance Plan	New	Reduction (Decrease in number of contacts by increasing access to timely, quality information.) Target to be determined.
6.D Satisfaction rating among other Ministries with Alberta Health and Wellness' contribution to Cross-Ministry Initiatives	83% (2002)	90% (2004)
6.E Per cent of Alberta Health and Wellness employees* who report that the organization provides the support they need to acquire or develop knowledge and skills in their current jobs	76% (2003)	78% (2004)

* Refers to department staff only.

EXPENSE BY CORE BUSINESS

(thousands of dollars)

	Comparable 2002-03 Actual	Comparable 2003-04 Budget	Comparable 2003-04 Forecast	2004-05 Estimates	2005-06 Target	2006-07 Target
Encourage and Support Healthy Living	192,417	235,147	238,827	232,623	237,132	239,587
Ensure Quality Health Care Services	6,529,181	7,007,484	7,031,679	7,651,356	8,094,946	8,414,424
Lead the Health System	115,024	107,674	107,674	111,862	118,326	118,326
MINISTRY EXPENSE	6,836,622	7,350,305	7,378,180	7,995,841	8,450,404	8,772,337

MINISTRY STATEMENT OF OPERATIONS

(thousands of dollars)

	Comparable 2002-03 Actual	Comparable 2003-04 Budget	Comparable 2003-04 Forecast	2004-05 Estimates	2005-06 Target	2006-07 Target
REVENUE						
Internal Governmental Transfers	104,987	196,380	196,380	209,274	219,059	221,797
Transfers from Government of Canada:						
Canada Health and Social Transfer	931,106	1,112,809	1,187,775	-	-	-
Canada Health Transfer	-	-	-	1,096,791	1,126,771	1,174,149
Health Reform Fund	-	99,200	99,676	150,497	353,810	458,377
Diagnostic / Medical Equipment Fund	-	49,600	49,584	49,640	49,690	-
Other	19,049	135,563	134,019	328,184	273,839	209,396
Premiums, Fees and Licences	936,749	934,459	946,508	950,999	964,985	979,181
Other Revenue	78,434	65,452	75,433	77,973	66,152	65,452
MINISTRY REVENUE	2,070,325	2,593,463	2,689,375	2,863,358	3,054,306	3,108,352
EXPENSE						
Program						
Regional Health Services	3,909,611	4,133,261	4,154,761	4,506,899	4,721,537	5,010,398
Diagnostic/Medical Equipment	-	49,600	49,600	49,640	49,690	-
Province-Wide Services	418,042	416,962	416,962	454,309	471,571	490,434
Total Regional and Province-Wide Health Services	4,327,653	4,599,823	4,621,323	5,010,848	5,242,798	5,500,832
Physician Services	1,381,887	1,455,700	1,454,600	1,521,600	1,652,000	1,718,080
Non-Group Health Benefits	413,066	416,887	455,587	531,623	547,485	551,363
Allied Health Services	62,456	75,575	75,575	77,500	87,119	87,119
Protection, Promotion and Prevention	141,727	172,459	174,859	176,518	178,712	178,489
Human Tissue and Blood Services	115,605	130,000	123,000	137,000	144,350	144,350
Other Provincial Programs	142,903	173,634	173,378	185,659	195,366	197,106
Alberta Alcohol and Drug Abuse Commission	57,798	59,963	61,243	66,157	68,592	71,330
Health Reform	13,586	98,226	70,474	115,745	154,455	146,939
Ministry Support Services	105,536	110,522	110,625	116,334	116,813	113,135
Systems Development	23,507	16,153	16,153	15,494	21,351	22,231
Health Care Insurance Premiums Revenue Write-Offs	50,218	41,363	41,363	41,363	41,363	41,363
Valuation Adjustments and Other Provisions	680	-	-	-	-	-
MINISTRY EXPENSE	6,836,622	7,350,305	7,378,180	7,995,841	8,450,404	8,772,337
Gain (Loss) on Disposal of Capital Assets	-	-	-	-	-	-
NET OPERATING RESULT	(4,766,297)	(4,756,842)	(4,688,805)	(5,132,483)	(5,396,098)	(5,663,985)

CONSOLIDATED NET OPERATING RESULT

(thousands of dollars)

	Comparable 2002-03 Actual	Comparable 2003-04 Budget	Comparable 2003-04 Forecast	2004-05 Estimates	2005-06 Target	2006-07 Target
Ministry Revenue	2,070,325	2,593,463	2,689,375	2,863,358	3,054,306	3,108,352
Inter-ministry consolidation adjustments	(105,148)	(196,380)	(196,652)	(209,274)	(219,059)	(221,797)
Consolidated Revenue	1,965,177	2,397,083	2,492,723	2,654,084	2,835,247	2,886,555
Ministry Program Expense	6,836,622	7,350,305	7,378,180	7,995,841	8,450,404	8,772,337
Inter-ministry consolidation adjustments	(361)	(200)	(472)	(200)	(200)	(200)
Consolidated Program Expense	**6,836,261**	**7,350,105**	**7,377,708**	**7,995,641**	**8,450,204**	**8,772,137**
Gain (Loss) on Disposal of Capital Assets	-	-	-	-	-	-
CONSOLIDATED NET OPERATING RESULT	(4,871,084)	(4,953,022)	(4,884,985)	(5,341,557)	(5,614,957)	(5,885,582)

CAPITAL INVESTMENT BY CORE BUSINESS

(thousands of dollars)

	Comparable 2002-03 Actual	Comparable 2003-04 Budget	Comparable 2003-04 Forecast	2004-05 Estimates	2005-06 Target	2006-07 Target
Encourage and Support Healthy Living	163	25,530	25,530	26,730	25,753	26,178
Ensure Quality Health Care Services	1,259	-	-	28,151	16,700	17,840
Lead the Health System	15,264	11,400	10,400	11,737	5,550	5,370
MINISTRY CAPITAL INVESTMENT	16,686	36,930	35,930	66,618	48,003	49,388

CAPITAL INVESTMENT BY PROGRAM

(thousands of dollars)

	Comparable 2002-03 Actual	Comparable 2003-04 Budget	Comparable 2003-04 Forecast	2004-05 Estimates	2005-06 Target	2006-07 Target
Protection, Promotion and Prevention	-	25,400	25,400	26,600	25,500	26,000
Alberta Alcohol and Drug Abuse Commission	163	130	130	130	253	178
Health Reform	1,259	-	-	28,151	16,700	17,840
Ministry Support Services	4,147	-	-	1,630	1,000	1,000
Systems Development	11,117	11,400	10,400	10,107	4,550	4,370
MINISTRY CAPITAL INVESTMENT	16,686	36,930	35,930	66,618	48,003	49,388

APPENDIX: THE ALBERTA ALCOHOL AND DRUG ABUSE COMMISSION (AADAC)

The Alberta Alcohol and Drug Abuse Commission (AADAC) is mandated by the *Alcohol and Drug Abuse Act* to operate and fund services addressing alcohol, other drug and gambling problems, and to conduct related research.

AADAC is an agency of the Government of Alberta reporting to the Minister of Health and Wellness. The Commission is governed by a Board of up to 12 members appointed by the Lieutenant Governor in Council. The Chair is a Member of the Legislative Assembly. The Commission Board provides policy direction for AADAC's programs and services.

LINK TO THE GOVERNMENT BUSINESS PLAN

AADAC is directly linked to government as part of the Ministry of Health and Wellness and is referenced in the Ministry Business Plan under:

Goal 1: Albertans choose healthier lifestyles.
Strategy: Ensure that addiction information, prevention and treatment is available province-wide.

VISION

A healthy society that is free from the harmful effects of alcohol, other drugs and gambling.

MISSION

Making a difference in people's lives by assisting Albertans to achieve freedom from the harmful effects of alcohol, other drugs and gambling.

CORE BUSINESSES

Core Business 1: Information

Goal 1 - To inform Albertans about alcohol, other drug and gambling issues and AADAC services.

Core Business 2: Prevention

Goal 2 - To prevent the development of and reduce the harms associated with alcohol, other drug and gambling problems.

Core Business 3: Treatment

Goal 3 - To provide treatment programs and services that assist Albertans to improve or recover from the harmful effects of alcohol, other drug and gambling problems.

STRATEGIC PRIORITIES 2004-07

One of the pillars of the Government of Alberta's 20-year strategic plan, Today's Opportunities, Tomorrow's Promise, is to make Alberta the best place to live, work and visit. AADAC contributes to this vision by delivering responsive and affordable programs and services that promote healthy living. Through review of external and internal challenges, AADAC has identified the following strategic priorities for 2004-07:

1. Ensure the ongoing sustainability of addiction services across the province.
2. Continue to emphasize youth programs and services for women and families.
3. Enhance research and information services to support prevention and treatment programming.
4. Maintain a priority on tobacco reduction in Alberta.
5. Continue to support employee wellness initiatives.

CORE BUSINESSES, GOALS, STRATEGIES AND MEASURES

Core Business One: Information

GOAL ONE 1

To inform Albertans about alcohol, other drug and gambling issues and AADAC services.

What it means AADAC provides Albertans with current and accurate information on alcohol, other drugs and gambling. Information management and dissemination creates greater awareness of addiction issues and AADAC services, and is required to support the development and delivery of prevention and treatment programming. Information and resource materials are available through AADAC offices and clinics and are accessible on the AADAC web site at **www.aadac.com**.

Performance Measures	Last Actual (2002-03)	Target (2004-05)	Target (2005-06)	Target (2006-07)
Percentage of Albertans who are aware of AADAC services	89%	90%	90%	90%
Percentage of women who are aware that alcohol use during pregnancy can lead to life-long disabilities in a child	89%	90%	91%	92%

Core Business Two: Prevention

GOAL TWO 2

To prevent the development of and reduce the harms associated with alcohol, other drug and gambling problems.

What it means AADAC provides programs and services that are designed to prevent alcohol, other drug and gambling problems, and reduce the harms associated with substance abuse and problem gambling. Prevention strategies are intended to increase protective factors and reduce risk factors for the population as a whole, and within specific groups.

Performance Measures	Last Actual (2000-01)	Target (2004-05)	Target (2005-06)	Target (2006-07)
Prevalence of smoking among Alberta youth*	17.9%	16%	15.5%	15%
Prevalence of regular, heavy drinking among young Albertans	34%	33%	32%	31%

* also referred to under Goal 1 of the Ministry Business Plan.

Core Business Three: Treatment

GOAL THREE 3

To provide treatment programs and services that assist Albertans to improve or recover from the harmful effects of alcohol, other drug and gambling problems.

What it means AADAC offers a broad continuum of treatment services that assist Albertans to improve or recover from the harmful effects of alcohol, other drug and gambling problems. Treatment is aimed at adults, youth and their families who are displaying significant problems. Services include community-based outpatient counselling, day programs, crisis and detoxification services, short and long-term residential treatment and overnight shelter. Specialized programs are available for youth, women, Aboriginal Albertans, business and industry referrals and persons with opiate dependency or cocaine addiction.

Performance Measures	Last Actual (2002-03)	Target (2004-05)	Target (2005-06)	Target (2006-07)
Percentage of clients who are satisfied with treatment services	95%	95%	95%	95%
Percentage of clients reporting they were improved following treatment	94%	95%	95%	95%